## CANDIDATE'S REPORT (to be filed by a candidate or his principal campaign committee) 1, Qualifying Name and Address of Candidate Office Sought (Include title of office as OFFICE USE ONLY well as parish, city, town and/or election MAYSON H FOSTER 300 W. DAKOTA HAMMOND LA TOYOL MAYOR City OF HAMMEND Thomp 3. Date of DETO BER 5 20021 Priznary through December 31 2005 This report covers from SAAIUREY 2005 4. Type of Report: 180th day prior to primary 40th day after peneral 90th day prior to primary Annual (future election) Supplemental (past election) 30th day prior to primary 10th day prior to primary Amendment to prior report 10th day prior to general 5, FINAL REPORT IF. Withdrawn Filed efter the election AND all loans and debts perd **Uпорровеd** 6. Name and Address of Financial Institution 7. Full Name and Address of Treasurer (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all PARISH NATIONAL BANK None HAMMERAD LA 70403 9. Name of Person Preparing Report MAYSON FOSTER Daytime Telephone 8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY to, WE HEREBY CERTIFY that the information contained in this report and the attached Name and address of principal campaign achedules is true and correct to the best of our knowledge. Information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary). that no Information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted. day of JANUARY 2016 Signature of Candidate/Chairperson (To be sened by Chairperson only if report by principal campaign committee)

Daytime Telephone

Signature of Tressurer Form IQ2 Rev. 1988 Page Rev. 200

## SCHEDULE E-1: EXPENDITURES

Use this schedule to report information on all campaign expanditures for this reporting period. An "expanditure" is any payment made for the purpose of supporting your election to public office and includes monies spent for the campaign's general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-2: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are optional. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page. Name and Address of Recipient 2. Expenditures this Reporting Period a. Date(s) b. Purpose(s) Amount(s) HAMMOND HIEN SCHOOL HAMENO ND, CA FOOTBALL AD 5/14/05 3. SUBTOTAL (optional) TOTAL (optional - complete only on tast page of this schedule) Form 102, Ran. 356, Page Rev. 3/98

Page \_\_\_\_ of \_\_\_\_ pages.

## SCHEDULE A-3: OTHER RECEIPTS

This schedule is used to report those receipts that are not "contributions"; that is, monies paid to the campaign that are not given for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include interest or investment income. Receipts should be reported on this schedule only if they have not been reported elsewhere

Name and Address of Source	Z. Date(s)	3. Explanation(s)	4. Amount(s)
PARISH NATIONAL BANK HAMMOND, LA	MONTHLY	INTERFET	\$ 420
		+	
·			
	F		
tal OTHER RECEIPTS during this reporting perio			x 420

Page 3 of 5 pages.

## SCHEDULE B: LOANS RECEIVED

The following information must be provided for each I Also, complete this schedule for loans received in prior even if from the same source. Any personal funds a	oan or line of credit received to periods that are still outstanding	this reporting period, eving. Separate loans mus	ven if it has been repaid f be reported seperately
1. Name and address of lander  MHYSON FOSTER  BOO W. DAKOTA  JAMARU N.D. LA 70401  3. Endorsers/Guarantors	2. a. Date 7/2/67- c. Amount borrowed c. Balance due For lines of credit, give the date of credit, give the date of credit amount of the amount of the company of the credit amount of the credit amou	b. Interest rate	\$ 20 000 ro \$ [7 2/2 38
(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)	1 7 The state of the second control		
1. Name and address of lander	2. a. Date*  c. Amount borrowed*  d. Balance due  *For lines of credit, give the da 2a and list only the amount accommodity of the amount accommodity.  OPTIONAL TRANSPORT	tte the line of credit was t	\$s
3. Endorsers/Guarantors	OPTIONAL: Total amount of or 4. Repayments this period Date	Principel	Interest
·			
(Enter the full name and address of each person or entity that has showned the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)  For 102, Rev 3/86 Page Rev. 3/98	(List payments of principal and inærest separately. If separate amounts are not known, list as payments under principal.)		